2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000009085

Address:

City-St-Zip:

Entity Name: ARLINGTON AUTO MART, L.L.C.

FILED Mar 16, 2007 Secretary of State

Current P	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
SUITE 7	TON AVENUE VILLE, FL 322	111				
	ailing Addres		New Mailing Address:			
SUITE 7	TON AVENUE VILLE, FL 322					
FEI Number:	59-3609693	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	f New Registered Agent:	
SUITE 7	JOHN D TON AVENUE VILLE, FL 322					
The above in the State	named entity : e of Florida.	submits this statement for the	purpose of changing it	ts registered	d office or registered agent, or both	
SIGNATUR	RE:					
	Electror	ic Signature of Registered Ag	ent		Date	
MANAGING I	MEMBERS/MANA	AGERS:	ADDITIONS/CHANGES:			
Title: Name: Address: City-St-Zip:	T () LANGFORD, M 2290 SHEPHAF JACKSONVILLI	RD ST	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	FULMER, PAT	Delete GROVE COURT E, FL 32225	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	BARNES, WILL	RONT RD APT 1402	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name:	()	Delete	Title: Name:	PRES FULMER, JO	()Change(X)Addition DHN D MR.	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Address:

4829 WALNUT GROVE COURT

City-St-Zip: JACKSONVILLE, FL 32225

SIGNATURE: JOHN D FULMER PRES 03/16/2007